

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

DCCC

Full Name (Last, First, Middle Initial)

A. C ROBERT COOKEMailing Address 3535 KIRBY RD
APT K322

City	State	Zip Code
MEMPHIS	TN	38115-7744

FEC ID number of contributing
federal political committee.

C

Name of Employer

VA

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2016

Transaction ID : VT4C3Q8DPX2

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOHN COON

Mailing Address 63 BAY VIEW RD

City	State	Zip Code
DOVER	NH	03820-5203

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNIVERSITY OF NEW HAMPSHIRE

Occupation

ADJUNCT FACULTY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	24	/	2016

Transaction ID : VT4C3Q3KHA9

Amount of Each Receipt this Period

250.00

☐ Memo Item* EARMARKED CONTRIBUTION: SEE BELOW
EARMARKED THROUGH ACTBLUE

Full Name (Last, First, Middle Initial)

C. ACTBLUE PAC

Mailing Address 366 SUMMER ST

City	State	Zip Code
SOMERVILLE	MA	02144-3132

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

CONDUIT TOTAL LISTED IN AGG. FIELD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2382996.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	24	/	2016

Transaction ID : VT4C3Q3KHA9E

Amount of Each Receipt this Period

250.00

☒ Memo ItemNOTE: ABOVE CONTRIBUTION EARMARKED
THROUGH THIS ORGANIZATION.

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00